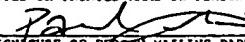




AMENDMENT TRANSMITTAL LETTER		CLIENT-MATTER NO.: 66797-028 (P-IX 1613)	
SERIAL NO: 08/471,622	FILING DATE: June 5, 1995	EXAMINER: J. Ulm.	GROUP ART UNIT: 1646 CONFIRMATION NO.: 8720
INVENTION: SURFACE EXPRESSION LIBRARIES OF HETEROMERIC RECEPTORS			

TO: Mail Stop Issue Fee
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

CERTIFICATE OF MAILING BY "EXPRESS MAIL"
"EXPRESS MAIL" MAILING LABEL NUMBER: EV 400 550 984 US
DATE OF DEPOSIT: November 12, 2003
I HEREBY CERTIFY THAT THIS PAPER OR FEE IS BEING DEPOSITED WITH
THE UNITED STATES POSTAL SERVICE "EXPRESS MAIL POST OFFICE TO
ADDRESSEE" SERVICE 37 C.F.R. 1.10 ON THE DATE INDICATED ABOVE, AND
IS ADDRESSED TO: MAIL STOP ISSUE FEE, COMMISSIONER FOR PATENTS,
P.O. BOX 1450, ALEXANDRIA, VA 22313-1450.

Paul Choi
(TYPED OR PRINTED NAME OR PERSON MAILING PAPER OR FEE)

(SIGNATURE OF PERSON MAILING PAPER OR FEE)

Transmitted herewith is an Amendment After Allowance Under 37 C.F.R. §1.312 in the above-identified application.

- Small Entity status of this application has been established under 37 CFR 1.27.
- Petition for Extension of Time is enclosed (in duplicate).
- Terminal Disclaimer with fee under 37 C.F.R. 1.20(d) is enclosed.
- No additional claims fee is required.
- An additional claims fee is required and has been calculated as shown below:

CLAIMS AS AMENDED

	NUMBER AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	NUMBER OF EXTRA CLAIMS PRESENTED	RATE		FEE	
				SMALL ENTITY	OTHER ENTITY	SMALL ENTITY	OTHER ENTITY
TOTAL CLAIMS	37	-	75	-	0	x \$9	\$18 = \$0.00 \$
INDEPENDENT CLAIMS	5	-	9	-	0	x \$42	\$84 = \$0.00 \$
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		YES	X NO	\$140	\$280	\$0.00	\$
				TOTAL ADDITIONAL FEE		\$0.00	\$

- * If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.
- ** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.
- *** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 0, write "0" in the space.
- Please charge my Deposit Account No. 502624 the amount of \$_____, \$____ of which covers the fee for a ____-month extension of time. A duplicate copy of this sheet is enclosed.
- The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No. 502624. A duplicate copy of this sheet is enclosed.

Inventor: William D. Huse

Serial No.: 08/471,622

Filed: June 5, 1995

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X The Commissioner is hereby authorized to charge to Deposit Account No. 502624 any fees under 37 CFR 1.17 which may be required under 37 CFR 1.136(a)(3) for an extension of time in any concurrent or future reply requiring a petition for extension of time. A duplicate copy of this sheet is enclosed.

Respectfully submitted,



David A. Gay
Registration No. 39,200

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San Diego, California 92122
858-535-9001